RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 18th State Senate District of Wisconsin petition for the recall of State Senator Randy Hopper from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Christine Kimball	Christine Kimball	934 wis ave N Fond du Lac Wis	☐ Town ☒ Village ☐ City N. Fond du Lac	3/26/'11	Email Phone
2. Tracy Kimball	Tracy Kimball	798 W SCOTT	☐ Town ☐ Village ☒ City N. FDL	3/26/'11	Email Phone
3. Eric Morris	Eric Morris	818 Michigan Ave N Fond du Lac WI	☐ Town ☒ Village ☐ City N. Fond Du Lac	3/26/'11	Email Phone
4. Joe Woicek	Joe Woicek	822 Minn. Ave. N. Fond du Lac WI	☐ Town ☒ Village ☐ City NFDL	3/26/'11	Email Phone
5. Mary Woicek	Mary Woicek	822 Minn. Ave N. Fond du Lac WI	☐ Town ☒ Village ☐ City N. Fond du Lac	/ /'11 3/26	Email Phone
6. DALE MIEKIE	Dale Miekie	842 MINNESOTA AVE N. FOND DU LAC WI.	☐ Town ☒ Village ☐ City N. Fond du Lac	3/26/'11	Email Phone
7. Joseph Dvorak	Joseph C Dvorak	N920 Minnesota Ave N Fond du Lac	☐ Town ☒ Village ☐ City NFDL	3/26/'11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, Katharine H. Odell (name of circulator), (certify):

I reside at 1415 Vilas Ave. Madison, WI 53711 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

3 / 26 / 2011 (date)

K. H. Odell (signature of circulator)

Page No. #2301

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 18th State Senate District of Wisconsin petition for the recall of State Senator Randy Hopper from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Barbara Romberger	Barbara Romberger	W4275 Pheasant Rd Fond du Lac W 54937	☒ Town ☐ Village ☐ City EMPIRE	3/20/'11	Email Phone 9:
2. Mary Sauer	Mary Sauer	1746 Creek Vu North Fond du Lac	☒ Town ☐ Village ☐ City North FdL	3/26/'11	Email Phone
3. Darrell Kelley	Darrell L. Kelley	358 E 11th Fond du Lac	☐ Town ☐ Village ☒ City Fond du Lac	3/26/'11	Email Phone 92
4. Claudette Kelley	Claudette Kelley	358 E. 11th St. Fond du Lac, WI	☐ Town ☐ Village ☒ City Fond du Lac	3/26/'11	Email Phone 920
5. RYAN HILBERT	Ryan Hilbert	395 E. 11th St Fond du Lac, WI	☐ Town ☐ Village ☒ City Fond du Lac	/ /'11 3/26/	Email Phone 92
6. Miki Hilbert	Michelle Hilbert	395 E. 11th St FDL WI	☐ Town ☐ Village ☒ City Fond du Lac	/ /'11 3/26	Email Phone 92
7.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, Jeffrey Schultz, (certify):
(name of circulator)

I reside at 264 Rose Ave Fond du Lac, WI 54935
(circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

March / 26 / 2011
(date)

[signature]
(signature of circulator)

Page No. #2302

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 18th State Senate District of Wisconsin petition for the recall of State Senator Randy Hopper from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Cindy Flood	Cynthia S. Flood	546 Mary Lee Drive	☐ Town ☐ Village ☒ City Fond du Lac	3/17/'11	Email Phone 920
2. Jim Flood	Jim Flood	546 Marylee Dr.	☐ Town ☐ Village ☐ City Fond du Lac	3/17/'11	Email 92 Phone
3. Paula Blank	Paula Blank	547 Marylee Dr.	☐ Town ☐ Village ☒ City Fond du Lac	3/18/'11	Email Phone 9
4. Dale M. Huck	Dale M. Huck	560 Pine Tree Dr.	☐ Town ☐ Village ☒ City Fond du Lac	3 19 2011 / /'11	Email Phone 92
5. CAROL Wendt	Carol Wendt	915 Wis. Ave. N7dL	☐ Town ☒ Village ☐ City No. Fond-du-lac	3-20-11 / /'11	Email Phone
6. Joe Enders	Joe Enders	915 Wis. Ave.	☐ Town ☒ Village ☐ City No. Fond-du-lac	3-20-11 / /'11	Email Phone
7.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, DAVID VELASCO (name of circulator), (certify):

I reside at 538 MARY LEE DR. FOND du LAC, WI (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

3 / 26 / 2011 (date)

D Velasco (signature of circulator)

Page No. #2303

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 18th State Senate District of Wisconsin petition for the recall of State Senator Randy Hopper from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. David Cratchy	David J Cratchy	205 North ST North Fond du Lac WI	☐ Town ☒ Village ☐ City N Fond du Lac	/ / '11 3 26	Email Phone
2. Judy Streeter	Judy Streeter	1505 Thurke Ave N. Fond du Lac	☐ Town ☒ Village ☐ City N.F.D.L.	/ / '11 3/26/2011	Email Phone 92
3. Lyle Schmidtke	Lyle Schmidtke	309 Southview Dr N Fond du Lac WI	☐ Town ☒ Village ☐ City NFDL	/ / '11 3 26 2011	Email Phone 92
4. Erin Andrews	Erin Andrews	323 Southview Dr NFDL	☐ Town ☒ Village ☐ City NFDL	/ / '11 3 26	Email Phone
5. LARRY LAMBERT	Larry Lambert	325 SOUTHVIEW DR. NFDL	☐ Town ☒ Village ☐ City NFDL	/ / '11 3/26/11	Email Phone
6. NORMA LAMBERT	Norma Lambert	325 SOUTHVIEW DR. NFDL	☐ Town ☒ Village ☐ City NFDL	/ / '11 3/26/11	Email Phone 92
7.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone

Certification of Circulator

I, DAVID VELASCO, (certify):
(name of circulator)

I reside at 538 MARY LEE DR. Fond du Lac, WI
(circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

3 / 26 / 2011
(date)

David Velasco
(signature of circulator)

Page No. #2304

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 18th State Senate District of Wisconsin petition for the recall of State Senator Randy Hopper from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Linda Wodsedalek	Linda Wodsedalek	326 Chapleau St North Fond du Lac, WI	☐ Town ☒ Village ☐ City N. FOND DU LAC	3 26 / '11	Email Phone (920
2. Peter Chisholm	Peter A. Chisholm	224 CHAPLEAU ST North Fond du Lac, WI 54937	☐ Town ☒ Village ☐ City North Fond du Lac	3 / 26 / '11	Email Phone 920
3. Linda M. Chisholm	Linda M. Chisholm	224 Chapleau St. North Fond du Lac, WI	☐ Town ☒ Village ☐ City North Fond du Lac	3 / 26 / '11	Email Phone 920
4. RUTH K ROENER	Ruth Kroener	204 NORTH ST. N. FOND DU LAC	☐ Town ☒ Village ☐ City N. F D.L	3 / 26 / '11	Email Phone 92
5.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
6.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
7.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone

Certification of Circulator

I, MARGARET J. SLEZ (name of circulator), (certify):

I reside at W10758 MIKARD RD. BEAVER DAM (TOWN OF WESTFORD) WI 53916
(circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

3 / 26 / 2011 (date)

Margaret J. Slez (signature of circulator)

Page No. #2305

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 18th State Senate District of Wisconsin petition for the recall of State Senator Randy Hopper from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Kris Tatro	Kris Tatro	1906 Chapman Ave NFDL WI	☐ Town ☑ Village ☐ City North Fond du Lac	3/26/'11	Email Phone 92
2. Hill Ken	Ken Hill	143 Willis Ct NFDL WI	☐ Town ☑ Village ☐ City N.FDL North Fond du Lac	3/26/'11	Email Phone 92
3. Jan Skaar	Jan Skaar	130 Blackbird St. NFDL, Wi	☐ Town ☑ Village ☐ City NFDL North Fond du Lac	3/26/'11	Email Phone 9
4. Benny Skaar	Ben Skaar	130 Blackbird St NFDL, Wi	☐ Town ☑ Village ☐ City NFDL North Fond du Lac	3/26/'11	Email Phone 9
5. Scott Hirst	[illegible]	224 Prairie Fox Ct NFDL WI	☐ Town ☑ Village ☐ City NFDL North Fond du Lac	3/26/'11	Email 92 Phone
6. Jason Mollek	[illegible]	216 Prairie Fox Ct	☐ Town ☑ Village ☐ City NFDL North Fond du Lac	3/26/'11	Email Phone 9
7.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, Nicholas Wilinski (name of circulator), (certify):

I reside at 418 Western Ave. Fond du Lac WI (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

3 / 26 / 2011 (date)

(signature of circulator)

Page No. #2306

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 18th State Senate District of Wisconsin petition for the recall of State Senator Randy Hopper from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Milan Stupar	[illegible]	750 E. Division	☐ Town ☐ Village ☒ City Fond du Lac	3/19/'11	Email mstu Phone
2. Tyler Lamb	[illegible]	1809 Chapman Ave.	☐ Town ☒ Village ☐ City N. Fond du Lac	3/26/'11	Email lamb Phone 920
3. Joyce Hills	Joyce Hills	143 Willer Ct.	☐ Town ☒ Village ☐ City N. Fond du Lac	3/26/'11	Email Phone 92
4. Erin Andrews	Erin Andrews	215 Prairie Fox Ct	☐ Town ☒ Village ☐ City North Fond du Lac ~~NFDL~~	3/26/'11	Email Phone 92
5. Ryan Andrews	[illegible]	215 Prairie Fox Ct	☐ Town ☒ Village ☐ City North Fond du Lac ~~NFDL~~	3/26/'11	Email Phone 92
6. Roy Dorn	Roy Dorn	1711 Chapman Ave	☐ Town ☒ Village ☐ City North Fond du Lac	3/26/'11	Email Phone 92
7.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, Michelle Wilinski (name of circulator), (certify):

I reside at 418 Wettstein Ave. Fond du Lac WI (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

03 / 26 / 2011 (date)

Michelle Wilinski (signature of circulator)

Page No. # 2307

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 18th State Senate District of Wisconsin petition for the recall of State Senator Randy Hopper from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Jenny Ross	Jenny Ross	70 Center St. NFDL, WI 54937	☐ Town ☒ Village ☐ City North Fond du Lac	3 / 26 '11	Email Phone
2. George Beahm	George Beahm	92 Center st NFDL 54937	☐ Town ☒ Village ☐ City North Fond du lac	3 / 26 / '11	Email Phone
3.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
4.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
5.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
6.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
7.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone

Certification of Circulator

I, Ann Byfield (name of circulator), (certify):

I reside at 201 N. Harrison St. Stoughton WI (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

3 / 26 / 2011 (date)

Ann Byfield (signature of circulator)

Page No. #2368

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 18th State Senate District of Wisconsin petition for the recall of State Senator Randy Hopper from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. RICHARD A. MAUCH	R A Mauch	570 ELIZA Beth St Fond du Lac	☐ Town ☐ Village ☒ City FDL	3 / 26 / '11	Email Phone 920
2. ELIZABETH A. MAUCH	Elizabeth A Mauch	570 Elizabeth St Fond du Lac WI	☐ Town ☐ Village ☒ City FDL	3 / 26 / '11	Email Phone 920-
3.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
4.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
5.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
6.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
7.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone

Certification of Circulator

I, Roy Ramirez (name of circulator), (certify):

I reside at N8429 Cty Rd QQ Malone WI 53049
(circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

3 / 26 / 2011 (date)

Roy Ramirez 3-26-11 (signature of circulator)

Page No. #2309

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 18th State Senate District of Wisconsin petition for the recall of State Senator Randy Hopper from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Kathleen Fenhouse	Kathleen Fenhouse	30½ E 13th Fond du Lac	☐ Town ☐ Village ☒ City FDL	3/26/'11	Email Phone 9
2. Ellen Sook	Ellen Sook	43 S. Boardman FDL 54935	☐ Town ☐ Village ☒ City FDL	3/26/'11	Email Phone 8
3. Kimberly Carew	Kimberly Carew	380 E 10th Fond du Lac, WI 54935	☐ Town ☐ Village ☒ City FDL	3/26/'11	Email Phone 9
4. Alice Schmidt	Alice Schmidt	W2658 County Rd H ~~W2658 Rd H~~	☒ Town ☐ Village ☐ City Empire	3/26/'11	Email Phone 9
5.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
6.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
7.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, Roy Ramirez (name of circulator), (certify):

I reside at N8424 County Rd QQ Malone Wi (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

3 / 26 / 2011 (date) Roy Ramirez 3-26-11 (signature of circulator)

Page No. #2310

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 18th State Senate District of Wisconsin petition for the recall of State Senator Randy Hopper from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Justin E. Lowe		131 Clinton St. N. Fond du Lac WI 54937	☐ Town ☒ Village ☐ City N. Fond du Lac	03/26/'11	Email Phone
2. Joanne Leal		311 Marcoe St N. Fond du Lac, WI 54937	☐ Town ☒ Village ☐ City N. Fond du Lac	3/26/'11	Email Phone
3. Larry Eike Jr.		161 MARCOE STREET N. Fond du Lac WI 54937	☐ Town ☒ Village ☐ City N. Fond du Lac	03/26/'11	Email Phone
4. Larry Eike Jr		161 Marcoe St.	☐ Town ☒ Village ☐ City NFDL	3/26/'11	Email Phone
5. LINDA ERK		161 Marcoe ST	☐ Town ☒ Village ☐ City NFDL	/ /'11 3-26-11	Email Phone
6. Karl Blount		97 Marcoe N.F.D.L.	☐ Town ☒ Village ☐ City N.F.D.L.	3/26/'11	Email Phone
7. Linda Patt			☐ Town ☐ Village ☐ City	3/2/'11	Email Phone
8. Linda Patt		79 Clinton St NFDL	☐ Town ☒ Village ☐ City NFDL	3/26/'11	Email Phone 92
9.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, Barb Winger-Rourke (name of circulator), (certify):

I reside at 11000 Bliss St. Stoughton WI (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

3 / 26 / 2011 (date)

(signature of circulator)

Page No. #2311

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 18th State Senate District of Wisconsin petition for the recall of State Senator Randy Hopper from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. TIM GRAINGER	Tim Grainger	90 Clinton St.	☐ Town ☐ Village ☐ City North Fond du Lac	3/26/'11	Email / Phone
2. SCOTT LOBAJESKI	Scott Lobajeski	150 CLINTON ST	☐ Town ☑ Village ☐ City NORTH FOND DU LAC	3/26/'11	Email / Phone
3. DAVID SOLID	David Solid	220 Marcoe St	☑ Town ☑ Village ☐ City North Fond Du Lac	3/26/'11	Email / Phone
4. ~~[illegible]~~			☐ Town ☐ Village ☐ City	3/26/'11	Email / Phone
5. GAYLE LOBAJESKI	Gayle Lobajeski	204 Marcoe ~~[illegible]~~	☐ Town ☑ Village ☐ City N. Fond du Lac	3/26/'11	Email / Phone
6. Gary Lobajeski	Gary Lobajeski	204 Marcoe	☐ Town ☑ Village ☐ City N. Fond du Lac	3/26/'11	Email / Phone
7. Steven Anderson	Steven Anderson	150 Marcoe St.	☐ Town ☐ Village ☐ City N. Fond du Lac	3/26/'11	Email / Phone
8. MARIAN BLAZEK	Marian Blazek	98 MARCOE St	☐ Town ☑ Village ☐ City N. Fond du Lac	3/26/'11	Email / Phone
9. Wendy Kunesh	Wendy Kunesh	62B Marcoe St	☐ Town ☑ Village ☐ City North Fond Du Lac	3/26/'11	Email / Phone
10. Tina Warriner	[illegible]	52 center St	☐ Town ☑ Village ☐ City N. Fond du Lac	3/26/'11	Email / Phone

Certification of Circulator

I, Ann Byfield (name of circulator), (certify):

I reside at 201 N. Harrison St. Stoughton, WI (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

Mar. / 26 / 2011 (date)

Ann Byfield (signature of circulator)

Page No. #2312

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 18th State Senate District of Wisconsin petition for the recall of State Senator Randy Hopper from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Anna Jones	Anna Jones	612 Michigan Ave NFDL	☐ Town ☐ Village ☒ City N. Fond du lac	3/26/'11	Email Phone
2. Adam Kepin	[illegible]	614 Wisconsin Ave NFDL	☐ Town ☒ Village ☐ City N. Fond du Lac	3/26/'11	Email Phone
3. Angela Steffes	Angela Steffes	707 Wis Ave 2-B NFDL	☐ Town ☐ Village ☒ City N. Fond du lac	3/26/'11	Email Phone
4. Mary Anderson	Mary Anderson	105 Harrison St NFDL WI	☐ Town ☐ Village ☒ City N Fond du lac	3/26/'11	Email Phone
5. Jessica Longtine	Jessica Longtine	120 Harrison St	☐ Town ☐ Village ☒ City N Fond du lac	3/26/'11	Email Phone
6. Cheri Kohlhamer	Cheri Kohlhamer	702 Illinois Ave NFdL WI	☐ Town ☒ Village ☒ City N. Fond du Lac	3/26/'11	Email Phone
7. ELROY HUEBSCHMAN	E Corey Huebschman	606 ILL AVE NFDL	☐ Town ☒ Village ☐ City N FONDULAC	3-26	Email Phone
8. Connie Huebschman	Connie Huebschman	606 Ill Ave N Fond du Lac Wi 54937	☐ Town ☒ Village ☐ City N Fond du lac	3/26/'11	Email Phone
9. Judith Searcy	Judith Searcy	15 Winnebago St. N. FDL Wi 54937	☐ Town ☒ Village ☐ City N. Fond du Lac	3/26/'11	Email Phone
10. J Donald Searcy	J. DONALD SEARCY	SAME AS ABOVE	☐ Town ☒ Village ☐ City N. Fond du Lac	3/26/'11	Email Phone

Certification of Circulator

I, James Congdon (name of circulator), (certify):

I reside at N7991 Schwarze Rd Horicon, WI 53032
(circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

3 / 26 / 2011 (date)

James Congdon (signature of circulator) 2313

Page No. X

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 18th State Senate District of Wisconsin petition for the recall of State Senator Randy Hopper from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Andrew Zach	Andrew Zach	603 Indiana Ave NFDL WI 54937	☐ Town ☑ Village ☐ City N. Fonddulac	3/26/'11	Email Phone
2. Justin Clark	Justin Clark	612 Indiana Ave NFDL. WI 54937	☐ Town ☑ Village ☐ City N. Fonddulac	3/27/'11	Email Phone
3.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
4.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
5.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
6.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
7.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone

Certification of Circulator

I, James Congdon (name of circulator), (certify):

I reside at N7991 Schwarzer Rd Horicon, WI 53032
(circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

3 / 26 / 2011 (date)

James Congdon (signature of circulator)

2314

Page No. 1 # 2

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 18th State Senate District of Wisconsin petition for the recall of State Senator Randy Hopper from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Eugene Scovalla	Eugene Scovalla	16 Cardinal Court	☐ Town ☒ Village ☐ City North Fond du Lac	3/26/'11	Email Phone
2. USONA M. SCHEMMEL	Usona M. Schemmel	20 Cardinal Ct.	☐ Town ☒ Village ☐ City NFDL	3/26/'11	Email Phone
3. Christine Brazeau	[illegible]	10 Swan Dr	☐ Town ☒ Village ☐ City North Fond du Lac	3/26/'11	Email Phone
4. KATE KOLASKE Kate Kolaske	Kate Kolaske	8 MOCKINGBIRD	☐ Town ☒ Village ☐ City North Fond du Lac	3/26/'11	Email Phone
5. Elizabeth Weill	[illegible]	43 Mockingbird Lane	☐ Town ☒ Village ☐ City N. FDL	/ /'11 3 26 11	Email Phone
6. Earl Lindsley	[illegible]	49 Mockingbird Lane 49 Mockingbird Ln	☐ Town ☒ Village ☐ City N. FDL	3/26/'11	Email Phone
7.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, Holly L S Rabe (name of circulator), (certify):

I reside at 624 Ledgeview Blvd. Fond du Lac, WI (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

3 / 26 / 2011 (date)

Holly L S Rabe (signature of circulator)

Page No. # 23/15

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 18th State Senate District of Wisconsin petition for the recall of State Senator Randy Hopper from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Ronald Schroeder	Ronald Schroeder	52 Light House La N Fond du Lac WI 54937	☐ Town ☒ Village ☐ City N Fond Du Lac	~~[illegible]~~ 3/26/11	Email Phone
2. Matthew Rusanski	Matthew Rusanski	200 twin lakes WI 54937 N. Fond du Lac	☐ Town ☒ Village ☐ City N. Fond du Lac	3/26/'11	Email Phone
3. Roseann Bjork	Roseann Bjork	186 TWIN LAKES DR	☐ Town ☒ Village ☐ City N FOND DU LAC	3/26/'11	Email Phone
4. Sabrina Lubin	[illegible]	186 twin Lakes dr N Fond du lac	☐ Town ☒ Village ☐ City N FOND DU LAC	3/26/'11	Email Phone
5. EUGENE BLECHA	Eugene Blecha	160 TWIN LAKES DR	☐ Town ☒ Village ☐ City N FOND DU LAC	3/26/'11	Email Phone
6. RUTH BLECHA	Ruth Blecha	160 TWIN LAKES DR N. FOND DU LAC, WI 54937	☐ Town ☒ Village ☐ City N. Fond Du Lac	3/26/'11	Email Phone
7. Joe Sawyer	[illegible]	17 Seagull Place N. Fond du Lac, WI 54937	☐ Town ☒ Village ☐ City N. Fond du Lac	3/26/'11	Email Phone
8. J Chiere	J Chiere	15 Portage Pl.	☐ Town ☒ Village ☐ City N. Fond du Lac	3/26/'11	Email Phone
9. Tammy Brook	Tammy Brook	112 twin Lakes DR NFDL WI 54937	☐ Town ☒ Village ☐ City NFDL	3/26/'11	Email Phone
10. Carol Bacon	Carol Bacon	110 Twin Lakes Dr. NFDL 54937	☐ Town ☒ Village ☐ City NFDL	3/26/'11	Email Phone

Certification of Circulator

I, Ann Pesch (name of circulator), (certify):

I reside at ~~Ann Pesch~~ 425 Highland Ave Brownsville, WI 53006
(circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

3/26/2011 (date) Ann Pesch (signature of circulator)

Page No. # 2316

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 18th State Senate District of Wisconsin petition for the recall of State Senator Randy Hopper from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Chris McKinnes	Chris McKinnes	106 Twin Lakes Drive	☐ Town ☒ Village ☐ City North Fond du Lac	3 /26/'11	Email Phone
2. Pat Snyder	Pat Snyder	58 Robin Drive	☐ Town ☒ Village ☐ City North Fond du Lac WI	3 /26/'11	Email Phone
3. Lucas Hicks	[illegible]	50 Robin Dr NFDL	☐ Town ☒ Village ☐ City NFD	3 /26/'11	Email Phone
4. VIRGINIA KRAUSE	Virginia Krause	38 Robin Dr NFDL	☐ Town ☒ Village ☐ City NFD	3 /26/'11	Email Phone
5. Paula Meyer	Paula Meyer	30 Robin Dr. NFDL	☐ Town ☒ Village ☐ City NFDL	3/26/11	Email Phone
6. Dan Meyer	[illegible]	30 Robin Dr. NFDL	☐ Town ☒ Village ☐ City NFDL	3/26/'11	Email Phone
7.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, Ann Pesch (name of circulator), (certify):

I reside at 425 Highland Ave. Brownsville, WI 53006 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

3 / 26 / 2011 (date)

Ann Pesch (signature of circulator)

Page No. #2317

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 18th State Senate District of Wisconsin petition for the recall of State Senator Randy Hopper from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Peggy O'Neil	Peggy O'Neil	59 Robin Drive North Fond du Lac, WI	☐ Town ☒ Village ☐ City North Fond du Lac	3 / 26 '11	Email Phone
2. Evelyn Rodgers	Evelyn Rodgers	45 Robin Drive N. Fond du Lac, WI	☐ Town ☒ Village ☐ City N. Fond du Lac	3 / 26 '11	Email Phone
3.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
4.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
5.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
6.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
7.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone

Certification of Circulator

I, Ann Resch (name of circulator), (certify):

I reside at 425 Highland Ave Brownsville, WI 53006 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

3 / 26 / 2011 (date)

Ann Resch (signature of circulator)

Page No. #2318

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 18th State Senate District of Wisconsin petition for the recall of State Senator Randy Hopper from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Jackie Eisenach	Jackie Eisenach	193 Twin Lakes Dr. North Fond du Lac Wi	☐ Town ☒ Village ☐ City North Fond du Lac	3/26/'11	Email Phone
2. Scott L. Church	[signature]	193 Twin Lakes D N. Fond du Lac	☐ Town ☒ Village ☐ City N. Fond du Lac	3/26/'11	Email Phone
3. TONY SCHMITZ	Tony Schmitz	167 Twin Lakes Dr. N. F.DL 53	☐ Town ☒ Village ☐ City N. FDL	3/26/'11	Email Phone
4. Scott Engman	Scott Engman	163 Twin Lakes Dr. N. FDL 54937	☐ Town ☒ Village ☐ City N. FDL	3/26/'11	Email Phone
5. Tracie Loper Tracee Loper	Tracee Loper	149 twin Lakes drive N FDL, Wi 54937	☐ Town ☒ Village ☐ City N FDL	3/26/'11	Email Phone
6. Cerenda Dieiandro	[signature]	NFDL WI 54937 123 TWIN LAKE DR	☐ Town ☒ Village ☐ City NFDL	3/26/'11	Email Phone
7. JUDITH WALTHER	J Walther	121 TWIN Lake DR NFDL WIS 54937	☐ Town ☒ Village ☐ City NFDL	3/26/'11	Email Phone
8. DAVE KAISER	Dave Kaiser	107 TWIN LAKES DR NFDL WI 54937	☐ Town ☒ Village ☐ City NFDL	3/26/'11	Email Phone
9. SANDRA Phillips	Sandra Phillips	N.F.D.L. Wi 54937 93 Mockingbird Ln	☐ Town ☒ Village ☐ City N. FDL	3/26/'11	Email Phone
10. Michael D. O'Neil	Michael D. O'Neil	59 Robin Dr N. Fond Du Lac Wi	☐ Town ☒ Village ☐ City N. Fond du Lac	3/26/'11	Email Phone

Certification of Circulator

I, Ann Pesch (name of circulator), (certify):

I reside at 425 Highland Ave. Brownsville, WI 53006
(circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

3/26/2011 (date) Ann Pesch (signature of circulator)

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 18th State Senate District of Wisconsin petition for the recall of State Senator Randy Hopper from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE (Rural address must also include box or fire no.)	MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING	
1. Sharon Frees	Sharon K Frees	5 Cardinal Ct N. FDL, Wis	☐ Town ☑ Village ☐ City NFDL	3 26 '11	Email Phone 92
2. DJ Rabideaux	DJ Rabideaux	5 Cardinal Ct N. Fond du Lac	☐ Town ☑ Village ☐ City NFDL	3 /26 '11	Email Phone 9
3. Cynthia A Iwen	Cynthia A Iwen	15 Swan Dr N. Fond du Lac	☐ Town ☑ Village ☐ City NFDL	3 / 26 / '11	Email Phone
4. Donna R Hein	Donna R Hein	3 Swan Dr N. Fond du Lac	☐ Town ☑ Village ☐ City N. FDL	5 26 / / '11	Email Phone
5. Joseph Vadnais	Joseph Vadnais	20 Oriole Pkwy N. Fond du Lac	☐ Town ☑ Village ☐ City N. FDL	3 26 / / '11	Email Phone 9
6. ~~Attorney~~ Bonnie Ramirez	Bonnie Ramirez	7 Mockingbird N. Fond du Lac, Wis	☐ Town ☑ Village ☐ City N.F.DL.	3 26 / / '11	Email Phone
7. Colin Ramirez	Colin Ramirez	7 Mockingbird La N. Fond du Lac Wis	☐ Town ☑ Village ☐ City N.F.dL	3 /26/ '11	Email Phone
8. Carol Lara	Carol A Lara	25 Mockingbird Ln N.F.D.L. WI. 54937	☐ Town ☑ Village ☐ City NFDL	3/26 '11	Email Phone 90
9. Joan Bublitz	Joan Bublitz	52 Mockingbird Ln N.F.D.L WI	☐ Town ☑ Village ☐ City NFDL	3 /26/ '11	Email Phone 5
10. Paul LeDoux	Paul LeDoux	52 Mockingbird La NFDL WI	☐ Town ☑ Village ☐ City NFDL	3 /26 '11	Email Phone 2

Certification of Circulator

I, Troy A. Oflum (name of circulator), (certify):

I reside at 3 Blue Jay Ln NFDL WI 54937 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

03 / 26 / 2011 (date) (signature of circulator)

Page No. #2320

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 18th State Senate District of Wisconsin petition for the recall of State Senator Randy Hopper from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. WAYNE HALSEY	Wayne Halsey	541 WISCONSIN AVE. 54937	☐ Town ☒ Village ☐ City N. FOND DU LAC, WI.	03/26/'11	Email Phone
2. Jane Keenan	Jane Keenan	521 Wisconsin Ave 54937	☐ Town ☒ Village ☐ City N. Fond du Lac, WI	3/26/'11	Email Phone
3. BLAIR MULHOLLAND	Blair Mulholland	N7405 CALUMET ST. 54935	☒ Town ☐ Village ☐ City TAYCHEEDAH	3/26/'11	Email Phone
4. Eunice Hensel	Eunice Hensel	305 Illinois Ave. N. Fond du Lac 54937	☐ Town ☒ Village ☐ City N. Fond du Lac	/ /'11	Email Phone
5. Angel Adam Gilbertson	Angel Gilbertson	519 Illinois Ave N. FDL 54937	☐ Town ☒ Village ☐ City NFDL	/ /'11 3/26/11	Email Phone
6. Danielle Cle Leon Thuermer		317 Indiana Ave NFDL 54937	☐ Town ☒ Village ☐ City NFDL	3/26/'11	Email de Phone 9
7. Brian Thuermer		317 Indiana Ave NFDL 54937	☐ Town ☒ Village ☐ City NFDL	/ /'11 526	Email b Phone
8.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, Cynthia Sampson (name of circulator), (certify):

I reside at 719 S. Orchard St, Unit B, Madison WI 53715 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

March / 26 / 2011 (date)

Cynthia Sampson (signature of circulator)

Page No. #2321

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 18th State Senate District of Wisconsin petition for the recall of State Senator Randy Hopper from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Lori Demmin	Lori Demmin	2880 Commander Ct. Oshkosh	☐ Town ☐ Village ☒ City Oshkosh	3/6/'11	Email lori Phone
2. Bradley Demmin	Bradley Demmin	2880 Commander Ct. Oshkosh	☐ Town ☐ Village ☒ City Oshkosh	3/10/'11	Email bden Phone (
3. Matt Captaine	Matt Capt	2840 Shorewood Dr Oshkosh	☒ Town ☐ Village ☒ City Oshkosh	3/10/'11	Email (Phone (
4. Bill Kolarik	William Kolarik	2528 Shorewood Dr Oshkosh	☐ Town ☐ Village ☒ City Oshkosh	3/10/'11	Email b Phone
5. Susan M. Dolan	Susan M. Dolan	3010 Shorewood Dr. Oshkosh, WI	☒ Town ☐ Village ☒ City Oshkosh	3/10/'11	Email ksdol Phone 9
6. Keith R. Dolan	Keith R. Dolan	3010 Shorewood Dr. Oshkosh, WI 54901	☒ Town ☐ Village ☒ City Oshkosh	3/10/'11	Email K Phone
7. John C. Stack	John Stack	2950 Shorewood Dr Oshkosh, WI 54901	☒ Town ☐ Village ☒ City Oshkosh	3/10/'11	Email Phone
8. Amy Stack	Amy Stack	2950 Shorewood Dr. Oshkosh, WI 54901	☒ Town ☐ Village ☒ City Oshkosh	3/10/'11	Email O Phone
9. Kandi Kolarik	Kandi Kolarik	2528 Shorewood Dr. Oshkosh, WI 54901	☐ Town ☐ Village ☒ City Oshkosh	3/15/'11	Email Kan Phone (920
10. Leslie Cota	Leslie Cota	4078 Murphys Oshkosh 54904	☐ Town ☐ Village ☒ City Oshkosh	3/16/'11	Email Phone

Certification of Circulator

I, Lori L. Demmin (name of circulator), (certify):

I reside at 2880 Commander Ct. Oshkosh (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under 8.12.13(3)(a), Wis. Stats.

03 / 26 / 2011 (date)

Lori L. Demmin (signature of circulator)

2372

Page No. # ~~2372~~

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 18th State Senate District of Wisconsin petition for the recall of State Senator Randy Hopper from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Therese A. Hanan	Therese A Hanan	1020 Devonshire Dr. Oshkosh WI 54902	☐ Town ☒ Village ☒ City Oshkosh	3/26 '11	Email Phone
2. Virginia Latimer	Virginia Latimer	1035 Devonshire Dr Oshkosh WI 54902	☐ Town ☐ Village ☒ City Oshkosh	3/26 '11	Email Phone
3.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
4. GERALD VOELKEL	Gerald Voelkel	920 MASON ST OSHKOSH, WI	☐ Town ☐ Village ☒ City	3-26-11	Email Phone
5. CAROL CASSE	Carol Casse	916 MASON ST. OSHKOSH WIS.	☐ Town ☐ Village ☒ City Oshkosh	3-26-11	Email Phone
6.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
7. Rachel Krubsack	Rachel Krubsack	1004 Mason St. Oshkosh, WI	☐ Town ☐ Village ☒ City Oshkosh	3 26 '11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone

Certification of Circulator

I, Rose Weisensel (name of circulator), (certify):

I reside at 1135 Ardmore Trail, Oshkosh, WI 54904 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

3 / 26 / 2011 (date) Rose Weisensel (signature of circulator)

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 18th State Senate District of Wisconsin petition for the recall of State Senator Randy Hopper from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. ELLIOTT GARB	[signature]	1545 ARBORETUM DR #413	☐ Town ☐ Village ☒ City OSHKOSH	3/21/'11 MARCH 21, 2011	Email Phone
2. FRANCES GARB	[signature]	1545 Arboretum Dr. #413	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email Phone
3.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
4.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
5.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
6.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
7.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone

Certification of Circulator

I, ELLIOTT GARB (name of circulator), (certify):

I reside at 1545 ARBORETUM DR #413 OSHKOSH 54901
(circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

/ MARCH 21 / 2011
(date)

[signature]
(signature of circulator)

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 18th State Senate District of Wisconsin petition for the recall of State Senator Randy Hopper from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE (Rural address must also include box or fire no.)	MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING	
1. Sabrina Bradley	Sabrina Bradley	921 E. Irving St.	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email / Phone
2. Paul Berger	Paul D Berger	715 Grove St	☐ Town ☐ Village ☐ City OSHKOSH	3/26/'11	Email / Phone
3. [illegible]	[illegible]	831 Jane St	☐ Town ☐ Village ☐ City Oshkosh	3/26/'11	Email / Phone
4. Anthony Lamoureux	[illegible]	845 Grove St.	☐ Town ☐ Village ☒ City Oshkosh	03/26/'11	Email / Phone
5. Stacey Lamoureux	Stacey Lamoureux	845 Grove St.	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email / Phone
6. Mary Hamilton	Mary Hamilton	823 Grove ST	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email / Phone
7. Andy Running	[illegible]	803 Grove st	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email / Phone
8. Kate Kelly	[illegible]	704 Oak St.	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email / Phone
9. Lee Richards	[illegible]	714 Oak St	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email / Phone
10. Christina Gruettner	Christina Gruettner	836 Oak St	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email / Phone

Certification of Circulator

I, Carl D. Owen (name of circulator), (certify):

I reside at 601 Yorktown Rd. DeForest WIS. (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

3 / 26 / 2011 (date)

Carl D. Owen (signature of circulator)

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 18th State Senate District of Wisconsin petition for the recall of State Senator Randy Hopper from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Barbara Schneider	[illegible]	805 Oak St Oshkosh WI	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email Phone
2. Jim Spitzer	[illegible]	719 Oak St. Oshkosh, WI.	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email Phone
3.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
4.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
5.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
6.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
7.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone

Certification of Circulator

I, Carl D. Owen (name of circulator), (certify):

I reside at 601 Yorktown Rd DeForest Wis (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

3 / 24 / 2011 (date)

Carl D Owen (signature of circulator)

2326

Page No. 2 # 22

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 18th State Senate District of Wisconsin petition for the recall of State Senator Randy Hopper from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Joyce D. Daum	Joyce D. Daum	1229 Evans St Oshkosh WI 54901	☐ Town ☐ Village ☒ City OSHKOSH	3/26/'11	Email Phone
2. DONALD E. DAUM	Donald E Daum	1229 EVANS ST OSHKOSH WI 54901	☐ Town ☐ Village ☒ City OSHKOSH	3/26/11	Email Phone
3. Paul Swanson	Paul Swanson	1206 Evans Oshkosh wi 54901	☐ Town ☐ Village ☒ City Oshkosh	3-26-11	Email Phone
4. Ainsley Rubbert	Ainsley Rubbert	806 E. New York Ave Oshkosh. WI 54901	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email Phone
5. Paula Steger	Paula E. Steger	801 E New York Oshkosh, WI 52901	☐ Town ☐ Village ☒ City Oshkosh	3/26/11	Email Phone
6. Scott Rogala	Scott A Rogala	1235 Evans St oshkosh, WI 54901	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email Phone
7. JANI SKOG		1006 BOWEN OSHKOSH.	☐ Town ☐ Village ☒ City OSHKOSH	3/26/'11	Email Phone
8. Patty Francour	Patty Francour	1000 Bowen St Oshkosh WI 54901	☐ Town ☐ Village ☒ City Osh	3/26/'11	Email Phone
9. Randy Kunstman	Randy Kunstman	1049 Bowen St Oshkosh WI 54901	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email Phone
10. JENNY SPEIGL	J Speigl	1222 Bowen St Oshkosh Wis	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email Phone

Certification of Circulator

I, LARRY MARKMAN, (certify):
(name of circulator)

I reside at 4943 WASHINGTON, BUTTE DES MORTS 54927.
(circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

3 / 26 / 2011
(date)

Larry Markman
(signature of circulator)

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 18th State Senate District of Wisconsin petition for the recall of State Senator Randy Hopper from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. RONALD VOSKUIL	Ronald Voskuil	511 Baldwin Ave	☐ Town ☐ Village ☒ City Oshkosh	3 /27/'11	Email Phone
2. LOIS RADIG	Lois Radig	517 Gehres Ct	☐ Town ☐ Village ☒ City Oshkosh	/ /'11 3 27	Email Phone
3. BERNARD RADIG	Bernard Radig	517 GEHRES CT	☐ Town ☐ Village ☒ City OSHKOSH	3 /27/'11	Email Phone
4. JEANNETTE CAPPS	Jeannette Capps	1115 Grand St	☐ Town ☐ Village ☒ City Oshkosh	3/27/'11	Email Phone 920-23
5. JANICE RETELLE	Janice Retelle	509 E New York Ave	☐ Town ☐ Village ☒ City Oshkosh	3 /27/'11	Email Phone 920
6.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
7.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, FAZEL HAYAT, (certify):
(name of circulator)

I reside at 123 W. Washington, #305, MADISON, WI 53703
(circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

3 / 27 / 2011
(date)

(signature of circulator)

Page No. # 2328

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 18th State Senate District of Wisconsin petition for the recall of State Senator Randy Hopper from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Samantha Gabrilska	Samantha Gabrilska	502 E. Custer Ave. Oshkosh, WI 54901	☐ Town ☐ Village ☒ City Oshkosh	03/16/'11	Email S Phone (
2.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
3.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
4.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
5.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
6.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
7.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone

Certification of Circulator

I, Dan Gabrilska (name of circulator), (certify):

I reside at 4051 Prairie Lane, Oshkosh WI 54901 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

3 / 26 / 2011 (date)

(signature of circulator)

2309

Page No. # ~~2329~~

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 18th State Senate District of Wisconsin petition for the recall of State Senator Randy Hopper from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Ross K Lossle	Ross Lossle	4420 Sherman Rd Oshkosh Wi.	☑ Town ☐ Village ☐ City Oshkosh	3 / 18 / '11	Email Phone
2. CATHY WOOD	Cathy Wood	2225 Vinland St Oshkosh 54901	☐ Town ☐ Village ☒ City Oshkosh	3 / 18 / '11	Email Phone
3. Alex Gabrilska	alex Gabrilska	502 E Custer Ave Oshkosh 54901	☐ Town ☐ Village ☒ City Oshkosh	3 / 29 / '11	Email Phone
4.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
5.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
6.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
7.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone

Certification of Circulator

I, Dan Gabrilska (name of circulator), (certify):

I reside at 4051 Prairie Lane, Oshkosh, Wi 54901 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

3 / 26 / 2011 (date)

Dan Gabrilska (signature of circulator)

Page No. # 2330

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 18th State Senate District of Wisconsin petition for the recall of State Senator Randy Hopper from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE (Rural address must also include box or fire no.)	MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING	
1. Daniel Reyer	Dan Reyer	1326 Oak St Oshkosh WI 54901	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email Ry Phone
2. Eva Walther	Walther	1216 Oak St. Oshkosh WI 54901	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email MYS Phone
3. Steve Koehler	Steve Koehler	1219 OAK ST OSHKOSH, WI 54901	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email Phone 92
4. Joan Ormosen	Joan Ormosen	1337 OAK ST Oshkosh, WI 54901	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email Phone 92
5. Jimmy Yang	Jimmy Yang	1420 Oak St. Oshkosh, WI, 54901	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email 92 Phone
6. Peter Miller	Peter Miller	W10136 Olden Rd. Pickett, WI 54964	☒ Town ☐ Village ☐ City Rosendale	3/26/'11	Email Phone
7. Tracy Ryckman	Tracy Ryckman	1405 Hazel St Oshkosh, WI 54901	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email Phone 9
8.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, W STEVE HUGHES (name of circulator), (certify):

I reside at 3100 LAKE MENDOTA DR. #404 MADISON, WI 53705
(circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

3 / 26 / 2011
(date)

(signature of circulator)

Page No. #2331

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 18th State Senate District of Wisconsin petition for the recall of State Senator Randy Hopper from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Kyle Black	Kyle Black	4120 County Rd. A. Apt. 406 Oshkosh, WI 54901	☐ Town ☐ Village ☒ City Oshkosh	3/21/'11	Email Phone (
2. Byron Schuster	Byron Schuster	1390 Broderick Rd. Omro WI 54963	☒ Town ☐ Village ☐ City Omro	3/21/'11	Email Phone 9
3. Mark Lantagne	Mark Lantagne	726 E. Lincoln Ave. Little Chute, WI. 54140	☐ Town ☒ Village ☐ City Little Chute	3/21/'11	Email Phone
4. Shannon Hassler	Shannon Hassler	2523 Oregon St Oshkosh WI 54902	☐ Town ☐ Village ☒ City Oshkosh	3/21/'11	Email sh Phone 9
5. George Kerrigan	George Kerrigan	530 Zarling Ave. Oshkosh WI. 54901	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email Phone 9
6.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
7.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, Patrick Kerrigan (name of circulator), (certify):

I reside at 2498 Omro Rd. Oshkosh (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

3 / 26 / 2011 (date)

Patrick Kerrigan (signature of circulator)

Page No. # 2332

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 18th State Senate District of Wisconsin petition for the recall of State Senator Randy Hopper from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Sarah B. Anderson	Sarah B. Anderson	627 Evans St.	☐ Town ☐ Village ☒ City Oshkosh	3 / 16 / '11	Email Saira Phone 9
2. Wilma I. Wilson	Wilma I. Wilson	840 W. 17th Ave.	☐ Town ☐ Village ☒ City OSHKOSH	3 / 16 / '11	Email Phone 9
3.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
4.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
5.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
6.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
7.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone

Certification of Circulator

I, Darrin Anderson (name of circulator), (certify):

I reside at 627 Evans St Oshkosh WI 54901
(circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

3 / 25 / 2011 (date)

Darrin M Anderson (signature of circulator)

2335 Page No. # ~~2335~~

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 18th State Senate District of Wisconsin petition for the recall of State Senator Randy Hopper from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

	PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1.	MARSHA FLANIGAN Marsha Flanigan Flanigan	Marsha Flanigan	1153 W 6th Ave	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email Phone
2.	JOAN WILLIAMS Joan Williams	Joan Williams	1710 VILLA PARK DR	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email Phone
3.	Sherry Millette	Sherry Millette	1960 Lennox St.	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email Phone
4.	Tyler Buchanan	T. Buch	1697 Maricopa Dr	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email Phone
5.	Jenny Schimke	Jennifer Schimke	114 E MELVIN AVE	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email Phone
6.	Rachel Kriz	Rachel Kriz	1697 Maricopa Dr	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email Phone
7.	Jeanne McCabe	Jeanne McCabe	1679 Maricopa Dr	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email Phone
8.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone
9.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.				☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, EDWARD JEPSEN (name of circulator), (certify):

I reside at 2317 Oakridge Ave Madison, WI 53704 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

March / 26 / 2011 (date)

Edward Jepsen (signature of circulator)

Page No. # 2334

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 18th State Senate District of Wisconsin petition for the recall of State Senator Randy Hopper from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. RICHARD BOESE	Richard C Boese	1629 9th St Oshkosh, WI	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email Phone
2. HELEN MEZZANO	Helen Mezzano	1703 W. 9th Ave Oshkosh, WI	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email Phone
3. Paul Paulick	Paul Paulick	1120 S. Westfield Oshkosh, WI	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email Phone
4. Kaye Fehrenbach	Kaye Fehrenbach	1335 Moreland St Apt A 1335 W. Lawrence Apt	☐ Town ☐ Village ☒ City Oshkosh, WI	3/26/11	Email Phone
5.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
6.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
7.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone

Certification of Circulator

I, Tim Hogeiken (name of circulator), (certify):

I reside at 516 Echo Valley Road Brooklyn WI 53521 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

March / 26 / 2011 (date)

Tim Hogeiken (signature of circulator)

2335

Page No. # 2335

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 18th State Senate District of Wisconsin petition for the recall of State Senator Randy Hopper from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Carole Davis	Carole Davis	1830 Crane St. Oshkosh, WI, 54901	☐ Town ☐ Village ☒ City Oshkosh	3/10/'11	Email Phone
2. Melvin DAVIS	Melvin Davis	1830 Crane St. Oshkosh, WI, 54901	☐ Town ☐ Village ☒ City Oshkosh	3/10/'11	Email Phone
3. JAMES DEBRUIN	James DeBruin	2368 HAMILTON ST OSHKOSH WI 54901	☐ Town ☐ Village ☒ City OSHKOSH	3/10/'11	Email Phone
4. Sheila DeBruin	Sheila DeBruin	2368 Hamilton Oshkosh, Wi. 54901	☐ Town ☐ Village ☒ City Oshkosh	3/10/'11	Email Phone
5. Peggy Griswold	Peggy Griswold	2320 Geneva St. Oshkosh WI 54901	☐ Town ☐ Village ☒ City Oshkosh	3/10/'11	Email Phone
6. Justin Griswold	[illegible]	2320 Geneva St Oshkosh, WI 54901	☐ Town ☐ Village ☒ City Oshkosh	3/10/'11	Email Phone
7. Penny Tyson	Penny Tyson	2352 Geneva St Oshkosh, WI 54901	☐ Town ☐ Village ☒ City Oshkosh	3/10/'11 (920)	Email Phone
8. George Tyson	George Tyson	2352 Geneva St WI Oshkosh, WI 54901	☐ Town ☐ Village ☒ City Oshkosh	3/10/'11 (920)	Email Phone
9.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, Teri Weyenberg (name of circulator), (certify):

I reside at 508 W. Bent Ave, Oshkosh, WI, 54901 (circulator's residence - including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

3 / 26 / 2011 (date)

Teri Weyenberg (signature of circulator)

2336 Page No. # 2336

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 18th State Senate District of Wisconsin petition for the recall of State Senator Randy Hopper from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Chantel Kornas	Chantel Kornas	510 Congress Ave Oshkosh, WI 54901	☐ Town ☐ Village ☒ City Oshkosh	3 /19/ '11	Emai Phon
2. Luruama Tawalwili Lorraine Tawalwili	[illegible]	1522 Jackson Oshkosh, WI 54901	☐ Town ☐ Village ☒ City Oshkosh	3 /25/ '11	Emai Phon
3. Mary Hatemann	Mary Hatemann	415 Congress ave Oshkosh WI 54901	☐ Town ☐ Village ☒ City Oshkosh	3 /25/ '11	Emai Phon
4. Travis Taylor	[illegible]	404 Stanley 54901 Osh wi	☐ Town ☐ Village ☒ City Oshkosh	3 /26/ '11	Emai Phon
5. Troy Loehrke	Troy Loehrke	508 Hobbs Ave Oshkosh, WI 54901	☐ Town ☐ Village ☒ City Oshkosh	3 /26/ '11	Emai Phon
6. Tara Matteo	Tara Matteo	508 hobbs ave Oshkosh, WI	☐ Town ☐ Village ☒ City Oshkosh	3 /26/ '11	Emai Phon
7.			☐ Town ☐ Village ☐ City	/ / '11	Ema Phon
8.			☐ Town ☐ Village ☐ City	/ / '11	Ema Phon
9.			☐ Town ☐ Village ☐ City	/ / '11	Ema Phon
10.			☐ Town ☐ Village ☐ City	/ / '11	Ema Pho

Certification of Circulator

I, Rebecca Srubas (name of circulator), (certify):

1122 Wisconsin St Oshkosh WI

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 18th State Senate District of Wisconsin petition for the recall of State Senator Randy Hopper from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Michael Humbert	Michael Humbert	295 Rebecca Run	☐ Town ☐ Village ☒ City Oshkosh	3 / 26 / '11	Email Phone
2. KEN KRUEGER	[illegible]	1365 Timothy Trl OSHKOSH 54904	☐ Town ☐ Village ☒ City Oshkosh	3 / 26 / '11	Email Phone
3. Carol Radley	Carol Radley	1215 Timothy Tr Oshkosh. 54904	☐ Town ☐ Village ☒ City Oshkosh	3 / 26 / '11	Email Phone
4. Nathan Peterman	Nathan J Peterman	1165 Timothy Tr. Oshkosh, WI.	☐ Town ☐ Village ☒ City Oshkosh	3 / 26 / '11	Email Phone
5. Mary Peterman	MARY PETERMAN	1165 Timothy Tr Oshkosh	☐ Town ☐ Village ☒ City Oshkosh	3 / 26 / '11	Email Phone
6. [illegible]	DAVID MAKURAT	251 OAK PARK DRIVE OSHKOSH WI	☒ Town ☐ Village ☐ City ALGOMA	3 / 26 / '11	Email Phone
7.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone

Certification of Circulator

I, Chrisann Makurat (name of circulator), (certify):

I reside at 251 Oak Park Dr., Osh, WI 54904 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

3 / 26 / 2011 (date)

Chrisann Makurat (signature of circulator)

2338

Page No. # ~~2338~~

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 18th State Senate District of Wisconsin petition for the recall of State Senator Randy Hopper from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Chongville Thao	[illegible]	1019 E. Nevada Ave	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email / Phone
2. Drowa Thao	Drowa Thao	1019 E. Nevada Ave	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email / Phone
3. [illegible]	[illegible]	1439 Grove St	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email / Phone
4. Dan Daniels	[illegible]	1431 Grove St.	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email / Phone
5. Joe Robl	Joseph L. Robl	1408 Grove	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email / Phone
6. Monica George	Monica George	1322 Evans St	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email / Phone
7. Alfred George	Alfred George	1322 Evans St	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email / Phone
8. Barbara Voh	Barbara Voh	1306 Evans Oshkosh	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11 2011	Email / Phone
9. Marcela Barron	Marcela Barron	1303 Evans Oshkosh	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email / Phone
10. Jennifer Perzentka	Jennifer Perzentka	1307 Evans St. Oshkosh WI 54901	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email / Phone

Certification of Circulator

I, Anne Lyttle (name of circulator), (certify):

I reside at 2514 Upham St Madison, WI 53704
(circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

3 / 26 / 2011 (date)

Anne Lyttle (signature of circulator)

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 18th State Senate District of Wisconsin petition for the recall of State Senator Randy Hopper from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	C
1. Roberta Johnson	Roberta Johnson	1321 EVANS Street	☐ Town ☐ Village ☒ City OSHKOSH	03/26/'11	Email Phone 920
2.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
3.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
4.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
5.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
6.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
7.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone

Certification of Circulator

I, Anne Lyttle (name of circulator), (certify):

I reside at 2514 Upham St Madison, WI 53704
(circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

3 / 26 / 2011 (date)

Anne Lyttle (signature of circulator)

2340

Page No. # ~~2340~~

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 18th State Senate District of Wisconsin petition for the recall of State Senator Randy Hopper from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. William Wolfgram	William Wolfgram	1029 Reichow St	☐ Town ☐ Village ☒ City OSHKOSH	3 / 26 / '11	Email Phone
2.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
3.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
4.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
5.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
6.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
7.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone

Certification of Circulator

I, Stephen W. Graham (name of circulator), (certify):

I reside at 534 Piper Dr. Madison, WI 53711 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

3 / 26 / 2011 (date)

Stephen W. Graham (signature of circulator)

2341

Page No. # ~~234~~

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 18th State Senate District of Wisconsin petition for the recall of State Senator Randy Hopper from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. TERRY TESCH	[illegible]	2895 MONTCLAIR	☐ Town ☐ Village ☒ City Oshkosh	3 26 '11	Email Phone
2. Paul Steeno	Paul [illegible]	1764 Hunters Glen Dr	☐ Town ☐ Village ☒ City Oshkosh	3 26 '11	Email Phone
3. Peggy Steeno	Peggy [illegible]	1764 Hunters Glen Dr	☐ Town ☐ Village ☒ City Oshkosh	3 26 '11	Email Phone
4. Debi Uchtenberg	Debi Uchtenberg	1751 Hunters Glen Dr	☐ Town ☐ Village ☒ City Oshkosh	3 26 '11	Email Phone
5. CATHY GIBSON	Cathy [illegible]	1747 Hunters Glen Oshkosh, WI	☐ Town ☐ Village ☒ City Oshkosh	3 26 '11	Email Phone
6.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
7.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone

Certification of Circulator

I, Minda L. Zimmerman (name of circulator), (certify):

I reside at 12W 21st Ave Apt C Oshkosh WI 54902 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

March / 26 / 2011 (date)

Minda L. Zimmerman (signature of circulator)

Page No. # 2342

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 18th State Senate District of Wisconsin petition for the recall of State Senator Randy Hopper from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Susan Hogenson	Susan Hogenson	1229 Grove St Oshkosh	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email Phone
2. Eric Bachhuber	Eric Bachhuber	1019 Hazel St. Oshkosh Wi, 54901	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email Phone
3. Anissa Meyer	Anissa Meyer	1011 Oak St. Oshkosh 54901	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email Phone
4. Jill Wara	Jill Wara	1019 Oak St Oshkosh 54901	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email Phone
5. Sandra Bueton	Sandra Bueton	1025 Oak St Oshkosh 54901	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email Phone
6. Jennifer Rogers	J Rogers	1045 OAK ST OSHKOSH, WI 54901	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email Phone
7.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, Dean Hoffman (name of circulator), (certify):

I reside at 2019 W. Charles St. Appleton, WI (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

March / 26 / 2011 (date)

Dean Hoffman (signature of circulator)

2343 Page No. # ~~2343~~

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 18th State Senate District of Wisconsin petition for the recall of State Senator Randy Hopper from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Chris Britten	[illegible]	1351 Pheasant Creek Drive	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email Phone
2.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
3.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
4.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
5.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
6.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
7.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ / '11	Email Phone

Certification of Circulator

I, Kayla Taggart (name of circulator), (certify):

I reside at 1610 W Glendale Ave Appleton (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

3 / 26 / 2011 (date)

Kayla Taggart (signature of circulator)

Page No. # 2344

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 18th State Senate District of Wisconsin petition for the recall of State Senator Randy Hopper from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Millie HARRON	Millie Harron	2235 White SWANDR OSHKOSH, WIS. 54901	☐ Town ☐ Village ☒ City Oshkosh	3/25/'11	Email Phone 920
2. Summer Heil Standke	[illegible]	2235 Crane St Oshkosh, WI 5901	☐ Town ☐ Village ☐ City Oshkosh	/ /'11 3/25	Email Phone
3. David Brodzinski	David Brodzinski	158 E. Ripple Av Oshkosh, WI 54902	☒ Town ☐ Village ☐ City Black Wolf	3/25/'11	Email Phone 9
4. Mike McNeely	[illegible]	498 Maple Ln Neenah W.S	☒ Town ☐ Village ☐ City Town of Neenah	3/25/'11	Email Phone
5. Heather Winchester	[illegible]	Oshkosh WI 54902 Spruce St 1219	☐ Town ☐ Village ☒ City Oshkosh	/ /'11 3/25	Email Phone 92
6. Stephen Gruetzmacher	[illegible]	1108 Taft Av. Oshkosh, WI 54902	☐ Town ☐ Village ☒ City Oshkosh	3/25/'11	Email Phone
7. Patty Gruetzmacher	Patty L Gruetzmacher	1108-Taft Ave Oshkosh, WI 54902	☐ Town ☐ Village ☒ City Oshkosh	3/25/'11	Email Phone
8. Tim Bradley	Tim Brad[illegible]	4518 Melody Lane Oshkosh, WI 54904	☒ Town ☐ Village ☐ City Nekimi	3/26/'11	Email Phone
9. Eric Hallquist	[illegible]	2030 Hazel St. Oshkosh, WI, 54901	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email Phone
10. Keith Gervais	[illegible]	2020 ~~Oshkosh~~ Parkside Oshkosh WI 54901	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email Phone

Certification of Circulator

I, RICHARD NORENBERG (name of circulator), (certify):

I reside at 524 OAK ST OSHKOSH, WI 54901 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

03 / 26 / 2011 (date)

Richard Norenberg (signature of circulator)

2345 Page No. ~~2345~~

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 18th State Senate District of Wisconsin petition for the recall of State Senator Randy Hopper from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Dale Tiedemann	[illegible]	328 Brand St Oshkosh WI 54901	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email [illegible] Phone [illegible]
2. Frances Morse	Frances Morse	1435 Powers Ave Oshkosh WI 54901	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email Phone 92[illegible]
3. Andy Dombrowski	[illegible]	1215 Powers St Oshkosh, WI 54901	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email Phone 920-4[illegible]
4. David Groth	David Groth	821 Randall Place Oshkosh WI 54901	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email Phone 920[illegible]
5. Dennis J. Lee	Dennis J. Lee	512 Algoma Blvd #301 Oshkosh WI 54901	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email Phone 9[illegible]
6. Brenda L Kent	Brenda L Kent	1307 Monroe St Oshkosh, WI 54901	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email [illegible] Phone
7. [illegible]	[illegible]	1221 Monroe St Oshkosh WI 54901	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email Phone 9[illegible]
8. Shannon Machaber	Shannon Machaber	619 E Nevada Oshkosh	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email Phone [illegible]
9. Kaniz Warner	Kaniz Warner	619 E Nevada Oshkosh	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email Phone 9[illegible]
10. Kay Braatz	Kay Braatz	1529 Maple Ave Osh 54902	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email [illegible] Phone 92[illegible]

Certification of Circulator

I, SHARON HUTCHINSON (name of circulator), (certify):

I reside at 551 S. RANDALL AVE. MADISON, WI 53715
(circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

MARCH / 26 / 2011 (date) Sharon E Hutchinson (signature of circulator)

2346 Page No. 2346

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 18th State Senate District of Wisconsin petition for the recall of State Senator Randy Hopper from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Sheila Jenkins	[illegible]	1412 PD Jones St. Oshkosh, WI 54901	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email Phone 920
2. Becky Durrant	[illegible]	1413 Bowen St. Oshkosh WI 54901	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email Phone 92
3. Hyling Soon Ju	[illegible]	1417 Bowen St Oshkosh WI 54901	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email Phone 920
4. Sue Schmidt	[illegible]	1314 Monroe St Oshkosh WI 54901	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email Phone
5.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
6.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
7.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, Hickory Hurie (name of circulator), (certify):

I reside at 1522 Vilas Ave Madison WI 53711 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

Mar / 26 / 2011 (date) [signature] (signature of circulator)

Page No. #2347

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 18th State Senate District of Wisconsin petition for the recall of State Senator Randy Hopper from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Ryan Gross	Ryan Gross	N8626 Van Dyne Rd.	☒ Town ☐ Village ☐ City Van Dyne	03/17/'11	Email Phone
2. Dan Rubin	Dan Rubin	1854 Mt. Vernon St	☐ Town ☐ Village ☒ City Oshkosh	3/17/'11	Email Phone
3. Kathy Rubin	Kathy Rubin	1854 Mt. Vernon St.	☐ Town ☐ Village ☒ City Oshkosh	3/17/'11	Email Phone
4.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
5.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
6.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
7.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, Colin Donnelly (name of circulator), (certify):

I reside at 1661 Covington Dr. Oshkosh, WI 54904 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

3 / 26 / 2011 (date)

(signature of circulator)

Page No. #248

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 18th State Senate District of Wisconsin petition for the recall of State Senator Randy Hopper from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Jon Gross	Jon Gross	N8626 Van Dyne Rd.	☑ Town ☐ Village ☐ City Van Dyne	3 /14/'11	Email Phone
2. Joe Forster	Joe Forster	369 N Park Ave	☐ Town ☐ Village ☒ City Fond du Lac	3 /14/'11	Email Phone
3. Kerry Bergund	Kerry Bergund	534 JACKSON ST.	☐ Town ☐ Village ☒ City Oshkosh	3 /15/'11	Email Phone 2
4.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
5.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
6.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
7.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, Colin Donnelly (name of circulator), (certify):

I reside at 1661 Covington Drive Oshkosh, WI 54904 (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

3 / 26 / 2011 (date)

(signature of circulator)

2349 Page No. # 2349

RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the 18th State Senate District of Wisconsin petition for the recall of State Senator Randy Hopper from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. Stacy Weeks	Stacy Weeks	938 Eastman St	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email Phone
2. Terry Ryan	Terry Ryan	323 S Spring	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email Phone
3. David Kreuzer	[illegible]	1033 Eastman	☐ Town ☐ Village ☒ City Oshkosh	3/26/'11	Email Phone
4. David Veith	David Veith	220 E Lincoln	☐ Town ☐ Village ☒ City Oshkosh	3-26/'11	Email Phone
5.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
6.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
7.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
8.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
9.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone
10.			☐ Town ☐ Village ☐ City	/ /'11	Email Phone

Certification of Circulator

I, Yvonne Turner (name of circulator), (certify):

I reside at 4924 Whitcomb Dr #3 Madison (circulator's residence – including number, street and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

March / 26 / 2011 (date)

Yvonne M. Turner (signature of circulator)

Page No. #2350